

(REFERENCE COPY - Not for submission)

# Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number: 0000098822 | Submit Date: 2020-01-21 | FRN: 0021206529

Purpose: Commercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/21/2020

Filing Status: Active

#### **Section I - General Information**

### 1. Respondent

FRN	Entity Name
0021206529	Southern Belle, LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
115 WEST MAIN STREET	Frankfort	KY	40601	+1 (502) 875- 1130	kristin@capcityradio.

### 2. Contact Representative

Name	Organization
Allan G. Moskowitz, Esq.	Allan G. Moskowitz, Esq.

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
10845 TUCKAHOE WAY	NORTH POTOMAC	MD	20878	+1 (301) 908- 4165	AMOSKOWITZ@AMOSKOWITZLAW.

## 3. Application Filing Fee

Question	Response
Is this application being submitted without a filing fee?	No

#### Fees

Application Type	Form Number	Fee Code	Quantity	Fee Amount	Subtotal
Biennial	Form 323	MAR	38	70	\$2,660.00
				Total	\$2,660.00

# 4. Nature of Respondent

(a) Provide the following information about the Respondent:	
Relationship to stations/permits	Licensee
Nature of Respondent	Limited liability company

(b) Provide the following information about this report:		
Purpose	Biennial	
"As of" date	10/01/2019	
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.	

# 5. Licensee(s) and Station(s)

### Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name	FRN
Southern Belle, LLC	0021206529

Fac. ID No.	Call Sign	City	State	Service
1037	WFRT-FM	FRANKFORT	KY	FM
2863	WOLY	OLEAN	NY	AM
2864	WPIG	OLEAN	NY	FM
8552	WHNA	RIVERSIDE	PA	FM
10687	WWLZ	HORSEHEADS	NY	AM
10688	WPGI	HORSEHEADS	NY	FM
11981	WPQP	CLEARFIELD	PA	FM
11982	WCPA	CLEARFIELD	PA	AM
21199	WNDA	WELLSBORO	PA	AM
21200	WNBT-FM	WELLSBORO	PA	FM
28131	WHUN	HUNTINGDON	PA	AM
28132	WDBF-FM	MOUNT UNION	PA	FM
30445	WLEJ	PLEASANT GAP	PA	FM
38271	WBHV-FM	STATE COLLEGE	PA	FM
39605	WCFT-FM	BLOOMSBURG	PA	FM
40383	WZBF	RIDGEBURY	PA	FM

40422	WNNA	BEAVER SPRINGS	PA	FM
40424	WRBG	MIFFLINBURG	PA	FM
42131	WMRF-FM	LEWISTOWN	PA	FM
42134	WLUI	LEWISTOWN	PA	AM
42135	WHUN-FM	HUNTINGDON	PA	FM
47423	WVPO	STROUDSBURG	PA	AM
47424	WSBG	STROUDSBURG	PA	FM
49419	W296DB	OLEAN	NY	FX
49446	WRCE	WATKINS GLEN	NY	AM
49449	WNGZ	MONTOUR FALLS	NY	FM
53611	WNKI	CORNING	NY	FM
54567	WFKY	FRANKFORT	KY	FM
60081	WVKY	SHELBYVILLE	KY	FM
62367	WIBF	MEXICO	PA	FM
62369	WJUN	MEXICO	PA	AM
63837	WQBG	ELIZABETHVILLE	PA	FM
64572	WZWW	BELLEFONTE	PA	FM
64850	WOWY	UNIVERSITY PARK	PA	FM
67696	WIFT	DU BOIS	PA	FM
74609	WKYW	FRANKFORT	KY	AM
78437	WOGA	MANSFIELD	PA	FM
85642	W267CJ	HORSEHEADS	NY	FX
139876	W249DD	HUNTINGDON	PA	FX
140305	W297BG	ULSTER	PA	FX
140887	W228DM	MANSFIELD	PA	FX
141466	W226CG	WELLSBORO	PA	FX
145358	W228CL	FRANKFORT	KY	FX
151391	W225CK	LEWISTOWN	PA	FX
156228	W248DK	BLOOMSBURG	PA	FX
165990	WKFT	STRATTANVILLE	PA	FM
170958	WQQP	SYKESVILLE	PA	FM
185614	WZBF-FM2	TOWANDA	PA	FB
200779	W298CR	MEXICO	PA	FX
201348	W276DG	STROUDSBURG	PA	FX
202178	W253CU	CLEARFIELD	PA	FX

### **Section II – Biennial Ownership Information**

1. 47 C.F.R. Section 73.3613 and Other Documents Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	Kristin Cantrell Family Trust	
Parties to contract or instrument	Judith M. Confer, Trustee	
Date of execution	09/2011	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Trust Agreement	

Document Information		
Description of contract or instrument	Certificate of Formation	
Parties to contract or instrument	Southern Belle, LLC	
Date of execution	09/2011	
Date of expiration	No expiration date	
Agreement type (check all that apply)	Other Agreement Type: Certificate of Formation	

### 2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information		
FRN	0021206529	
Entity Name	Southern Belle, LLC	
Address	PO Box	

	Street 1	115 WEST MAIN STREET	
	Street 2		
	City	Frankfort	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40601	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No

Ownership Information			
FRN	0021206545		
Entity Name	Kristin Cantrell Family Trust		
Address	РО Вох		
	Street 1	C/O 115 West Main Street	
	Street 2		
	City	Frankfurt	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40601	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	LC/LLC/PLLC Member		
Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	100.0%	Jointly Held? No
	Equity	100.0%	
		1	

Total assets (Equity Debt Plus)	100.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		Yes

EDN	0024420262		
FRN	0021420302	0021428362	
Name	Kristin Cantrell		
Address	РО Вох		
	Street 1	115 WEST MAIN STREET	
	Street 2		
	City	Frankfort	
	State ("NA" if non-U.S. address)	KY	
	Zip/Postal Code	40601	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	Jointly Held? No
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	Yes
(b) Respondent certifies th	at any interests, including equi	tv. financial. or voting	Yes

(c) Does the Respondent or any reported interest holder hold an attributable interest in any newspaper entities in the same market as any station for which this report is filed, as defined in 47 C.F.R. Section 73.3555?

If "Yes," provide information describing the interest(s), using EITHER the subform OR the spreadsheet option below. Respondents with a large number (50 or more) of entries to submit should use the spreadsheet option.

NOTE: Spreadsheets must be submitted in a special XML Spreadsheet format with the appropriate structure that is specified in the documentation. For instructions on how to use the spreadsheet option to complete this question (including templates to start with), please Click Here.

If using the subform, leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i). If using an XML Spreadsheet, enter "NA" into the percentage of total assets (Equity Debt Plus) field for an interest holder unless that interest holder has an attributable interest in the newspaper entity solely on the basis of the Commission's Equity Debt Plus attribution standard.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

(d) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other or related to each other as parentchild or as siblings?

No

If "Yes," provide the following information for each such the relationship.

(e) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?

If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be attributed an interest.

3. Organizational **Chart (Licensees** 

Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

The licensee has a single owner, a Trust which is controlled by on Trustee.

### Section III - Certification

**Section** Question Response Certification

No

No

Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: <b>President</b> Exact Legal Title or Name of Respondent: <b>Southern Belle, LLC</b> Name: <b>Kristin Cantrell</b> Phone: <b>5028751130</b> 01/21/2020